

10-01-01

PTO/SB/05 (11-00)

Please type a plus sign (+) inside this box → Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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1002 U.S. PTO  
1002/60
**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

- Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
- Applicant claims small entity status.  
See 37 CFR 1.27.
- Specification [Total Pages (21)]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross reference to related applications
  - Statement regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a Computer program listing appendix
  - Background of the Invention
  - Brief Summary of the invention
  - Brief Description of the Drawings
  - Detailed description
  - Claim(s)
  - Abstract of the Disclosure
- Drawing(s) (35 USC 113) [Total Sheets (7)]
  - Oath or Declaration [Total Pages (2)]
    - Newly executed (original copy)
    - Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
      - DELETION OF INVENTOR(S)  
Signed statement attaching deleting inventor(s)  
Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(g).
    - Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data sheet under 37 CFR. 76:

Continuation     Divisional     Continuation-in-part (CIP) of prior application no.: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

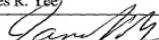
**19. CORRESPONDENCE ADDRESS** Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

 Correspondence address below

27305

Name	James R. Yee				
Address	Howard & Howard Attorneys, P.C. 39400 Woodward Avenue, Suite 101				
City	Bloomfield Hills	State	Michigan	Zip Code	48304-5151
Country	United States	Telephone	(248) 723-0349	Fax	(248) 645-1568

Name (Print/Type)	James R. Yee	Registration No. (Attorney/Agent)	34,460
Signature		Date	9/28/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

JC966 US 09/972/9 PTO  
10/28/00

**CERTIFICATE OF EXPRESS MAILING**

I hereby certify that the enclosed **PATENT APPLICATION** and fee is being deposited with the United States Postal Service as Express Mail, postage prepaid, in an envelope as "Express Mail Post Office to Addressee", Mailing Label No. EL826448331US and addressed to the Assistant Commissioner of Patents, Washington, D. C. 20231, on **September 28, 2001**.

  
Anne L. Kubit  
Anne L. Kubit

0395674260 "0826448331US"

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# FEE TRANSMITTAL

## for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,204.00

## Complete if Known

Application Number	
Filing Date	
First Named Inventor	DeWall et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	60,518-010

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number **08-2789**
- Deposit Account Name **Howard & Howard Attorneys**
- Change Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- Applicant claims small entity status. See 37 CFR 1.27
2.  Payment Enclosed:  
 Check     Credit card     Money Order     Other

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
Other fee (specify) _____			

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
101	710	201	355
106	320	206	160
107	490	207	245
108	710	208	355
114	150	214	75
<b>SUBTOTAL (1) (\$ 710.00)</b>			

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims below	Fee from below	Fee Paid
43	-20** =	23	414
4	-3*** =	1	80
Multiple Dependent		=	=

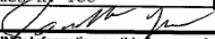
Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
103	18	203	9
102	80	202	40
104	270	204	135
109	80	209	40
110	18	210	9
** Reissue claims in excess of 20 and over original patent			
** Reissue independent claims over original patent			
** Reissue claims in excess of 20 and over original patent			
<b>SUBTOTAL (2) (\$ 494.00)</b>			

\*or number previously paid, if greater. For Reissues, see above

\*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$ -0-**

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	James R. Yee	Registration No. (Attorney/Agent)	34,460	Telephone	248-723-0349
Signature				Date	9/28/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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